

# MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO

FILE NO DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
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100						
TOTAL IND.	2					
TOTAL DEP.	15					
TOTAL CLAIMS	17					